

## **D.1 Consistency with Three-Year Program and Expenditure Plan**

KIWA Family Apartments project is consistent with the Los Angeles County Department of Mental Health's (DMH's) Three-Year Program and Expenditure plan by providing a continuum of services for Transition Age Youth (TAY) with mental illness who are homeless or at-risk of homelessness in a permanent supportive housing project. KIWA Family Apartments' supportive service plan was created with the Los Angeles County's Community Services and Support (CSS) plan in mind. The project will provide MHSA-eligible tenants with supportive services that promotes community reintegration and a commitment to recovery and wellness. The project will provide 10 units of affordable permanent housing to this MHSA target population, with mental health services made available through the Koreatown Immigrant Workers Alliance (KIWA) and DMH. All supportive services are designed to promote the tenants' wellness and overall successful transition to permanent supportive housing. The project will provide client driven, voluntary supportive services which are culturally and linguistically appropriate, and will specifically meet DMH's goal to reach unserved, underserved, or inappropriately served TAY.

## **D.2 Description of Target Population to be Served**

The Little Tokyo Service Center Community Development Corporation (LTSC CDC), KIWA & DMH Mental Health Service Provider plan to serve 10 Transition Age Youth (TAY) ages 18-25 and emancipated foster youth ages 16+ who are homeless and have a severe and persistent mental illness or a severe emotional disturbance in the proposed project. The target population will be homeless (as defined by MHSA Housing Program guidelines), but may also be at risk of homelessness (also as defined by MHSA guidelines) if they are transitioning from transitional housing, the foster care system, or the probation system. Emancipated foster youth will have demonstrated self-sufficiency and ability to live independently.

Their primary source of income, if any, is expected to be entitlement benefits, and prospective tenants' incomes will be at or below 30% AMI. The project will prioritize underserved API populations (including but not limited to: Cambodian, Chinese, Fijian, Filipino, Hawaiian, Hmong, Japanese, Korean, Laotian, Mien, Samoan, Tongan and Vietnamese), as recognized by DMH's Under Represented Ethnic Populations, within the guidelines of fair housing laws while also serving the general population as a whole, utilizing affirmative marketing and outreach.

The total housing project provides 52 housing units available to low-income individuals and families. Non-MHSA funded units will not be age-restricted. Of the 52 proposed units, 4 are studios, 24 are one-bedroom units, 8 units are two-bedroom units, and 16 units are three-bedroom units. The units will be restricted for low- and very low-income households that are earning up to 60% of the Area Median Income (AMI). The 10 units targeted for MHSA tenants will be 4 studio units as well as six 1-bedroom units, and will be spread throughout the building. As there is a high demand for affordable housing in the area, it is expected that many applicants will be from the surrounding Koreatown neighborhood.

While Service Area 4 contains the majority of the homeless population in Los Angeles County, most housing and service resources are concentrated in the Skid Row area of Downtown Los Angeles. KIWA Family Housing seeks to provide opportunities for permanent supportive housing in the Koreatown neighborhood, particularly as acute housing shortages, overcrowded housing, and a severe economic downturn places heavy downward pressure in one of the most densely populated regions of the County.

### **D.3 Tenant Selection Plan:**

#### **Referral to the Program**

LTSC CDC will serve as the property management agent for the project. KIWA, as lead service provider, and DMH as mental health service provider, will work with LTSC CDC for lease-up and tenant selection for MHSA-funded units. Prospective tenants will be primarily referred from DMH or supportive service partners in Los Angeles County including Pacific Clinics, Koreatown Youth and Community Center, Asian Pacific Counseling and Treatment Centers, and Hillside. LTSC CDC and KIWA will work directly within this informal network of service agencies in Service Planning Area 4 to recruit eligible applicants from Koreatown and surrounding neighborhoods. Other sources of referrals that have been identified include: Emancipation Services Division of the Department of Children and Family Services (DCFS), the Probation Department, New Image Shelter, Special Services for Groups (SSG), and the Homeless Outreach Program (HOPs). Finally, affirmative outreach will be conducted within the guidelines of fair housing laws through neighborhood serving organizations in Koreatown, ethnic newspapers and media, and other resources identified by KIWA.

#### **Tenancy application process**

Applicants may have a case manager or other Single Fixed Point of Responsibility (SFPR) at the time of application. KIWA and LTSC CDC will work closely with the applicant's SFPR throughout the application process to ensure that the process will go smoothly. Property Management staff will also be prepared to assist any applicants who might have trouble completing the application forms. This assistance might take the form of answering questions about the application, helping applicants who might have literacy, vision or language problems and, in general, making it possible for interested parties to apply for assisted housing and ensure that any requests for reasonable accommodations are processed in a timely fashion. KIWA's service coordinator will act on KIWA's behalf in this process.

All applicants for the MHSA-funded units who approach the housing project directly, or who are referred from a DMH mental health service provider must first complete DMH's standardized MHSA Housing Program –Certification Application, as well as complete the application process for KIWA Family Housing. Applicants who have been certified as may also be referred from DMH's Master Referral List.

If applicants for the non-MHSA funded units have not been certified by DMH, KIWA and LTSC CDC will work with them and their SFPR to ensure that the Certification Application along with a signed "Authorization to Disclose Client's Protected Health Information" information form is sent to DMH's Housing Policy & Development (HP&D) Unit for processing in a timely fashion. Property management must receive tenant certification from DMH in order to house an applicant. If there are no vacancies in the building, tenants may submit an interest form to LTSC CDC for processing prior to receipt of DMH certification. This will allow them to be placed on the waiting list, and

ultimately housed once they are certified by HP&D. However, no tenant shall be housed in the project's MHSA-funded units without prior DMH certification.

KIWA Family Housing will also have an internal application procedure as a component of the project's property management plan, as outlined below. The internal application must be completed and signed by the head of the household and any other adult member of the household. All other members of the household will be listed on the application form.

The following is an outline of the application process.

- KIWA Family Housing applications and program information will be distributed to local transitional living facilities, drop in centers, DMH service providers, and emergency shelters serving TAY. All qualified persons who respond during this period are to have an equal opportunity to be selected for occupancy.
- Applications shall be accepted by mail or in person at a designated pick up and drop off location during the hours of 9am to 5pm or as otherwise designated at lease-up. LTSC CDC and KIWA staff will be available to work with applicants and SFPRs to complete applications.
- At the end of the application period, LTSC CDC shall establish relative priority among those who respond during the period on a first come first served basis as of the date and time of the submission of the complete application.
- Once an applicant's priority has been established through these procedures, the process outlined below shall be followed.
- Eligible applicants (and their SFPRs, when appropriate) will be provided with third-party verification forms for income and TAY eligibility to be filled out by their income source and the proper social service provider.
- Applicants for MHSA-funded units will undergo a three-part screening process: the prospective tenant will be evaluated by LTSC CDC to determine if s/he meets income eligibility, and secondly meets MHSA eligibility requirements. SFPRs will be included in the evaluation process as appropriate. LTSC will also run a standard credit and eviction check. In collaboration with KIWA, LTSC CDC will determine whether or not the tenant is able to live independently, as outlined in the Internal Screening Process below, and whether or not s/he is prepared to abide by the terms of the lease at KIWA Family Housing. While all parties will respect and seek input from each other, in the case of disagreement over tenant selection, LTSC CDC will make the final determination, after extending reasonable accommodation of tenants' previous history.
- During rent-up, orientation meetings will be held with applicants who have or will provide third-party verification of income and MHSA eligibility. Whenever necessary, the management agents will assist applicants who have limited

fluency in English with KIWA staff, DMH service agency staff, or by referring that person to a social service agency which might be able to fulfill their translation needs.

- Upon third-party verification of income and MHSA eligibility, the applicant shall either be offered residency or their name shall be added to the waiting list in the order of their application time-date submittal number. LTSC CDC shall notify DMH of the outcome of the application process.
- Those applicants not selected for occupancy shall be provided with written notification stating the reasons for their ineligibility (a copy will also be provided to their SFPR if needed). An appeal process as outlined below in the Eligibility Criteria shall be available to the applicant.
- For those MHSA-eligible applicants not selected for occupancy, LTSC CDC shall arrange for a meeting with the TAY applicant and their SFPR, if applicable, to provide written notification stating the reasons for their ineligibility and discuss the decision with the applicant in person. An appeals process as outlined in the Eligibility Criteria below shall be available to the applicant.
- Those applicants that do not qualify for an MHSA-funded unit but are income-qualified may be eligible for tenancy in a non-MHSA funded unit.
- A grievance committee will consist of staff representatives from LTSC CDC who are different from those making the initial decision, and will also include KIWA staff members. DMH HP&D will be notified and involved in the process as needed. If the decision is reversed, the applicant will be returned to the approved applicant pool to be considered for future vacancies.

### **Waiting list procedure**

In the event that there are no immediate vacancies, the following waiting list procedure shall apply.

- All qualified applicants will be placed on a waiting list and shall receive a letter or postcard informing them of their status. Since the target population is homeless, LTSC CDC will also notify the applicant's SFPR (if applicable).
- After initial lease-up, interested applicants shall submit an interest form provided by LTSC CDC to be added to the waiting list. Applicants to MHSA-funded units will be screened for income eligibility and DMH certification, and will be selected upon the availability of unit.
- Applicants on the waiting list shall be taken in the order of the time-date listing, with those on the list the longest interviewed first.

- Prospective residents will be informed that continued income eligibility and annual income recertification will be required as a condition of occupancy.
- Qualified applicants and their SFPR (if applicable) shall be notified that they shall have 2 weeks to decide to take the available unit. Applicants will be given the opportunity to inspect the unit to be rented within that period. Should the applicant choose to rent the unit, the applicant shall sign an inspection form and a rental agreement, and shall pay the security deposit. Arrangements for the payment of the security deposit will be made with any MHSA-eligible tenants who have difficulty making a payment immediately.
- The waiting list will be updated continually and applicants on the waiting list must indicate every twelve (12) months their desire to remain on the list. LTSC CDC will notify the applicant and the applicant's SFPR (if applicable) in order to confirm such desire.

### **Appeals process for those who are denied tenancy**

Applicants who do not pass the eligibility requirements for an MHSA-funded unit will be sent a rejection letter (this letter may also be sent to their SFPR if needed). Applicants will have up to 14 days following their receipt of a rejection letter to file an appeal in writing. LTSC CDC will respond to all appeals within 72 hours. Such applicants will be encouraged to schedule an informal meeting to discuss the rejection or may choose to respond in writing. They will also have the opportunity to discuss their application and resultant rejection with a DMH assigned case manager.

If the applicant and/or the family still feel that the denial of their application for tenancy has not been resolved they can contact the Patient's Rights Office at DMH. Their office hours and telephone number will be provided to all applicants for MHSA-funded units at the beginning of the application process. They may also do this at any time during the application process. DMH will be informed of the outcome of the appeals process.

### **Reasonable Accommodations policy & protocols (as they relate to targeting & Tenant screening)**

All property management staff serving KIWA Family Housing will participate in Fair Housing training within 90 days of employment. All requests for reasonable accommodation will be met to the extent possible. It is expected that many of the MHSA eligible applicants may have atypical histories which would normally disqualify them for housing. LTSC CDC and KIWA understand that this will require flexibility under the screening approach outlined below and are prepared to provide such flexibility. Further, LTSC will engage the applicant's SFPR in the reasonable accommodation process to the fullest extent possible. Applicants or their SFPR may submit information regarding mitigating circumstances for which they may require reasonable accommodation for review in writing and through interview. A decision will be made in writing, and will include written findings for any rejection. The decision will

be provided to the applicant and their SFPR, if applicable. If requests are beyond the scope of this project, case managers and other support service staff will be equipped to issue referrals to partner organizations or other organizations that can meet the needs of the potential tenants.

### **Eligibility criteria (include how these criteria are consistent w/ CSS plan & MHSA Housing program target populations**

#### General Eligibility Criteria

LTSC CDC and KIWA will select tenants for the MHSA-funded units using criteria developed by the partners as outlined above and in accordance with Fair Housing laws. Selection of tenants for KIWA Family Housing will not rely solely on traditional property management standards; standards will be established that reflect a commitment to housing various subpopulations of the TAY, those who are both homeless and who have a severe and persistent mental illness and/or severe emotional disturbance.

#### MHSA Eligibility Criteria

- Eligible tenants must be ages 18-25, or 16+ with proof of emancipation from the foster care system
- Children and youth with severe emotional disorders or severe mental illness as defined in Welfare and Institutions Code Section 5600.3(a).
- In addition, the individual shall be homeless, meaning living on the streets or lacking a fixed and regular night-time residence. This includes living in a shelter, motel or other temporary living situation in which the individual has no tenant rights. Individuals may also be at risk of homelessness including TAY exiting institutional settings such as foster care or juvenile facilities.

DMH shall determine the eligibility of individuals applying for tenancy in an MHSA-funded unit for compliance with the MHSA Housing Program target population criteria.

### **Internal Process for screening and evaluating tenants for participation**

Applicants meeting DMH and income eligibility for assisted housing will then be screened according to the following criteria. These criteria, which are based on those set forth in the HUD Regulations, relate to the individual behavior of each applicant household. Selection of tenants will not rely solely on traditional property management standards, and each of the following criteria will be assessed on a case by case basis for each MHSA-eligible applicant. Exceptions will be made based upon information and consultation with the applicant and SFPR, taking into consideration pre-mental health history and post-mental health history.

- (1) Ability and willingness to pay rent in a timely manner,

- (2) Credit history and prior rent history, and interviews and personal references if no history is available
- (3) A record of disturbance of neighbors, destruction of property, or living or housekeeping habits at prior residences which may adversely affect the health, safety or welfare of other tenants, or cause damage to the unit or development;
- (4) Involvement in criminal activity on the part of any applicant family member which would adversely affect the health, safety or welfare of other tenants such as drug abuse or violence;
- (5) A record of eviction from housing or termination from residential programs;
- (6) An applicant's ability and willingness to comply with the house rules and regulations, and terms of the Property's lease.
- (7) An applicant's misrepresentation of any information related to eligibility, award of preference for admission, allowances, family composition or rent.

As the Property Management Company, LTSC CDC will be the final judge of what constitutes adequate and credible documentation. If staff have doubts about the veracity or reliability of information received, they will pursue alternative methods until they are satisfied that their documentation is the best available.

When a preliminary determination of eligibility and qualification for preferences has been made and either the verification forms have been returned or telephone verifications obtained, and the initial interview has been completed, the staff will make a preliminary recommendation of Admission or Rejection.

Following this recommendation, the appeals and reasonable accommodation processes noted in the Reasonable Accommodations and Appeals Process portions of this plan will be followed.

### **How Fair Housing Requirements will be Met**

Management will not discriminate on the grounds of race, color, national origin, religion, children, socio-economic class, gender, or disability. Management will not allow physical examination as a condition of occupancy for persons of any age.

The property management company will comply with all practices and procedures required by the mortgagee and/or all government agencies to insure that the prescribed fair housing goals are met in the operation of KIWA Family Apartments per Federal Code (24)CFR, part 200.620(a)-(c). Notices will be sent to local newspapers and publications serving the area in the languages spoken in that locale. The Fair Housing



Poster will be displayed in the rental office. The Handicapped Accessible symbol will also appear on all materials. TTY service is available for the deaf and the manager will be advised how to work with the operator. Vision impaired tenants will be given the opportunity to have all paperwork read to them and may record that meeting.

#### **D.4 Supportive Services Plan**

**\*Description of Services to be delivered, including where and how they will be delivered, the frequency with which they will be made available to tenants, the primary service provider, and other community linkages.**

The primary goal of this project's housing and supportive services is to assist the 10 MHSA-eligible TAY tenants to improve their overall functioning, to retain permanent housing, and to thrive as members of a mixed community. LTSC CDC and KIWA have entered into an agreement as co-developers, to provide supportive housing and supportive services for the MHSA-eligible tenants. LA County DMH will serve as the mental health service provider. The project seeks to (1) strengthen and enhance the independence and well being of MHSA-eligible tenants, and (2) provide them with comprehensive services that are voluntary, client-directed, strength-based, built on principles of recovery and resilience, and delivered responsively and respectfully in the community in a manner sensitive to the cultural needs of the individual served. By integrating tenants into a mixed housing population, they can take advantage of on-site services and resources on a continuum, providing for a smooth transition as they age. MHSA-eligible TAY tenants will already be in a living environment where they can adjust to living among the general population. After transition, they will have the option to continue participating in the building's activities and accessing on-site supportive services. To address any ongoing mental health needs, KIWA will work to identify off-site adult mental health services. The project will provide on-site services from KIWA as well as off-site services from a variety of community partners, with a staffing pattern developed specifically to meet the higher needs of the MHSA-eligible TAY tenants as outlined in Table 1. This staffing pattern includes 0.4 FTE Service Coordinator, 0.1 FTE Workforce Development staff, 0.1 FTE Life Skills Staff, 0.1 FTE Educational Support Staff, and 0.1 FTE Legal Services staff.

The primary service provider for the KIWA Family Apartments MHSA-eligible tenants will be KIWA, who will provide an on-site Service Coordinator who shall be responsible for coordinating mental health services for the MHSA-eligible tenants. On-site programs provided by KIWA accessible on a weekly basis include career development, life skills, educational support, and legal services. The primary mental health service provider will be DMH. KIWA and LTSC CDC will work with DMH and draw upon existing relationships with mental health service providers in Service Planning Area 4. KIWA and LTSC CDC will work with Pacific Clinics, Asian Pacific Counseling and Treatment Centers, Hillside, Koreatown Youth and Community Center, and other agencies if they are the SFPR for a tenant in an MHSA-eligible unit. The service coordinator shall be the link between DMH to KIWA and LTSC staff, and there shall be a strict firewall between service staff and property management staff to ensure tenant confidentiality and privacy.

Supportive services for the MHSA-eligible tenants are voluntary, and tenants are not required to participate as a requirement of housing. Case managers will work with tenants to develop Individual Service Plans (ISP) which will set the framework for

services and programs that meet their specific needs. The individual service plan will be centered around support from SFPRs, with a high level of engagement by the project's service coordinator to maintain ongoing access to a full range of resources. These duties are outlined in more detail in the following sections describing each component of the staffing pattern.

The Koreatown Immigrant Workers Alliance (KIWA) was created in 1992 out of the ashes of the Los Angeles Civil Unrest. Since its inception, KIWA's mission has been to empower workers and residents of Koreatown and build a multi-ethnic "Community Union" with the power to transform our workplaces and communities in Koreatown and to affect broad change throughout the greater Los Angeles area. KIWA is a membership-based organization with members of all ages, including families and children, Transition Age Youth (TAY) and elderly. Through its community programs, organizing efforts, and services, KIWA is strongly committed to empowering youth and young adults with programs to achieve financial and job stability, develop political leadership, and create healthy sustainable communities.

#### *Workforce Development/Case Management*

KIWA has been providing a workers' rights legal clinic and case management for the last 17 years. These workforce development services help clients maintain permanent job stability, resolve disputes and claims with employers, and provides a social network for economic opportunities. The workplace issues for which clients receive assistance include wage and hour issues, discrimination, state disability insurance, unemployment insurance benefit, and workers compensation. KIWA's case management staff handles approximately 500 cases each year. While most clients are working adults, approximately 5% of the clients are Transition Age Youth and young adults.

#### *Leadership Development*

KIWA is committed to develop young adults to become community leaders for community transformation. KIWA works with middle school, high school, and college students as volunteers and interns in its community programs. Interns and volunteers take on a variety of tasks including research, event planning, recruitment, survey collections, phone banking, and administrative work. When possible, KIWA provides stipends for intern positions.

Summer Activist Training- KIWA has been a leading partner in the Summer Activist Training program for the last 16 years. Approximately 20 youth ages 16-22 attend the training every year to engage in an intensive 3-day training on community organizing.

#### *Cultural Programs*

KIWA's Korean Drumming and Aztec Dance cultural programs provide cultural enrichment and interethnic collaboration. The programs are open to all community members, and many of the participants are students and young adults. These cultural programs reflect KIWA's multi-ethnic membership base, and help serve to bridge the gap across cultures in Koreatown. The programs help strengthen young participants' sense of identity as well as build their intergroup relational skills.

Services for MHSA-eligible tenants will be provided by KIWA on-site. KIWA Family Housing has been designed as KIWA's main office headquarters, where the organization will provide tenant services and supportive services. The ground floor will include 3,295 square foot (SF) of service space configured to provide resident manager and KIWA staff offices, counseling rooms, and larger community rooms. One-on-one therapy and counseling will be provided in the counseling rooms, and peer-to-peer groups, workshops, and group activities will utilize the larger community rooms. The service space will be configured to allow for informal interaction between staff and MHSA-eligible tenants, including offices accessible to tenants to the greatest extent possible. If needed, services can also be provided in the tenants' units. The studios are designed to provide sufficient space to accommodate one-on-one counseling if needed. The 1-bedroom units maximize tenant privacy while allowing for counseling in the living room. Security within the housing development will be achieved utilizing an electronic card security system to prevent unauthorized guests from entering the building. Protected Health Information (PHI) for all MHSA-eligible tenants will be securely kept in a double-locked file room, and social service staff will follow HIPAA guidelines for securing these files at all times. Property management staff will not have access to PHI, and will keep tenant files secured in a separate locked file cabinet.

A critical component of this supportive housing program is to create a supportive and nurturing community within the larger tenant community in the building. KIWA will provide tenant services for the general tenant population to build a strong sense of community, safety, and pride. KIWA will provide services such as workforce development and empowerment, educational support, life skills training, and legal services. Additionally, the project will emphasize building an MHSA-eligible TAY tenant community that is integrated into the building but also fully supported with staff, on-site programs, and community linkages to meet their specific needs. MHSA-eligible tenants will be encouraged to participate in overall tenant services programs, and staff will allocate a portion of their time dedicated to the specific needs of participating MHSA-eligible tenants. Clinical mental health services will be provided exclusively for the MHSA-eligible tenants. Clinical service programs may include individual counseling and therapy, peer-to-peer group activities, and community linkages. All supportive service staff, including case managers, service coordinator, and other staff identified in this service plan will work together to meet the needs of each MHSA-eligible tenant as appropriate to each individual service plan. Staff will be accessible to MHSA-eligible tenants throughout the day and past normal working hours to remain accessible to those who are employed.

The MHSA-eligible tenants will require age specific resources and community linkages such as educational and employment opportunities. The project is located near age-appropriate community resources, and KIWA and DMH will assist the MHSA-eligible tenants with linking to such community resources. A primary service goal will be to assist them to become financially independent and stably housed, which will be achieved through working towards obtaining gainful employment. Education and

employment readiness skills will be provided through KIWA programs as well as off-site community linkages. As determined and tracked through case management, the MHSA-eligible tenants will be linked to healthcare, education, and employment resources through various community-based agencies. Educational institutions located nearby include LAUSD Metropolitan Skills Center, Belmont Education And Career Center, Belmont Community Adult School, Los Angeles Community Adult School, Regional Occupational Program Center, Los Angeles Trade Tech, and the Abram Friedman Occupational Center. DMH case managers and KIWA staff will assist them with accessing courses and resources at these campuses. Additional health resources may be available through collaborations with the Asian Pacific Health Care Venture, Queenscare, St. John's Well Child Clinic, UCLA hospital, and LA County USC hospital. Linking with DMH wellness centers in Service Area 4 will also play a role in providing group activities to the TAY tenants.

DMH's approach to mental health services emphasizes a continuum of services from engagement, structured teaching, and individualized mentoring, to self-directed and peer-mediated activities. The services targeted to the MHSA-eligible tenants will be provided following a four-phase intervention or continuum based on the client's specific needs. The four phases are: 1) Engagement; 2) Intensive/Structured/Teaching; 3) Supportive/ Individualized/Mentoring; and 4) Follow-up/Peer-mediated/Self-Directed. Under this model, DMH will utilize clinical staff, including licensed psychologists and social workers, and project partners will provide staffing as appropriate, to provide intensive and comprehensive case management, employment training and life-skills coaching. Supportive services for the MHSA-eligible tenants are voluntary, and tenants are not required to participate as a requirement of housing.

Clinical staff and case managers will provide 24-7 crisis intervention services to MHSA-eligible tenants. In order to ensure that all MHSA-eligible tenants have available access in cases of crisis, all designated staff are asked to provide 24/7 crisis intervention coverage. MHSA-eligible tenants will be given numbers to call after hours in the event of a crisis. If the staff is not available, the after-hour voice mail should indicate the crisis response information. Staff are directed to respond as quickly as possible, and within an hour of any call. The following after hours policy will be followed.

### **After Hours**

1. A precipitating crisis is reported by an MHSA-eligible tenant, Staff will utilize appropriate clinical interventions over phone or in person, if needed, to de-escalate situation.

2. If the situation is escalating but not in immediate danger, the staff member should call Clinical Supervisor to consult.
3. The Clinical Supervisor will discuss the details of the event with the staff and provide clinical recommendations to continue to de-escalate situation. If the situation has defused, the staff will develop a safety plan to minimize risk of safety to client and others.
4. If the situation continues to escalate, Clinical Supervisor will reassess level of risk and, if deemed appropriate, will instruct the staff to contact the DMH ACCESS TEAM (1-800-854-7771).
5. If it is a life-threatening situation (e.g., threatening individual with a knife...) the staff and/or family member should immediately call 911.
6. The case manager or therapist and Clinical Services will then follow up with all parties after hospitalization and fully document the incident.

#### Staffing

The supportive services will be provided on-site to the extent possible, with referrals or appointments at other service facilities utilized. Total supportive services staffing, including KIWA's Service Coordinator and other program staff, will provide a client to staff ratio of 13 to 1 of on-site services (Table 1) to MHSA-eligible tenants. Staff will additionally be on-site to provide services to the entire tenant population. During operational hours, the service coordinator and staff will refer crises to case managers should they be off-site. DMH will assign case managers to work individually with each MHSA-eligible tenant to develop and implement an Individual Service Plan (ISP) tailored to the needs and desires of each tenant.

Office hours for supportive service staff at the KIWA site will be on weekdays from 10am to 7pm. After hours and on weekends, MHSA-eligible tenants will be directed to contact their case manager, who will be on call to respond to crises and emergencies, and able to come on-site as needed. KIWA will locate its headquarters in the building, providing on-site tenant services for the entire building tenants. The service coordinator will be on site a total of 40 hours per week, and will be available to MHSA-eligible tenants during these operational hours. The service coordinator will not provide mental health services, and is a separate staff position from case managers or clinical staff. The service coordinator will also have other duties to perform as a tenant services coordinator for the general tenant population, but will allocate hours as needed to MHSA-eligible tenants, up to 16 hours per week.

#### Service Coordination

The on-site service coordinator will be available 16 hours per week to coordinate supportive services for the MHSA-eligible tenants. The service coordinator will be employed by KIWA full time to coordinate services to the entire building. The on-site service coordinator is responsible for ensuring delivery of on-site supportive services as

well as coordinating other community services in conjunction with the case managers. The service coordinator will be considered the point person for the coordination of all services from KIWA, DMH, and any other service partners. This individual will act as a liaison and coordinate services with DMH mental health service providers, and community service providers located off-site. The service coordinator will not provide mental health services. The service coordinator will also have other duties to perform for the general tenant population, but will have specified hours set to assist the MHSA-eligible tenants during the work week. The service coordinator will facilitate regular meetings with all case managers and the property management staff. Finally, the service coordinator also attends any tenant council meetings and work with the council to resolve any issues that arise during those meetings.

The service coordinator will meet with tenants' case managers as needed, for up to 1 hour per week for each MHSA-eligible tenant to ensure appropriate level of services and progress on each MHSA-eligible tenant's ISP goals and needs. Individual therapy will be provided based on need. The service coordinator will also meet monthly, or other appropriate regularly set schedule, with staff of on-site programs provided by KIWA to review tenant engagement and resolve any challenges. On-site programs provided by KIWA accessible on a regular basis include workforce empowerment and development, educational support programs, life skills programs, and legal services.

#### Case Management

As the mental health service provider, DMH will provide case management to support the MHSA-eligible tenants. Case managers will make regular on-site visits according to each ISP, but will be accessible on an on-call basis 24/7 via cell phone. Tenants will have weekly meetings with their case manager, or other schedule as determined by the tenant. Case managers will work with tenants to develop Individual Service Plans (ISP) which will set the framework for services and programs that meet their specific needs. The individual service plan will be coordinated with support from SFPRs or case managers, with a high level of engagement by the project's service staff to maintain ongoing access to a full range of resources. This will include engagement in outside community linkages, structured programs on-site, individualized mentoring, and working with supportive services staff to provide and manage opportunities for peer-mediated and self directed activities. Case managers will also assist with the transportation needs of the tenants to utilize offsite services through agency vehicles or bus tokens.

#### Mental Health Services

Individual therapy will be provided based on need. The clinical team may include an off-site clinical supervisor, an off-site psychiatrist, and rehab specialists who will make visits to provide on-site services to the MHSA-eligible tenants, as needed. The staffing plan for these clinical specialists will be finalized to form a team specific to the project site as the project gets closer to lease-up. As much as possible, arrangements will be made for clinical staff to deliver services on-site. DMH will also draw upon existing relationships with mental health service providers in Service Planning Area 4, including Pacific Clinics, Asian Pacific Counseling and Treatment Centers, Hillside, and other agencies if they are the SFPR for a tenant in an MHSA-eligible unit.

**Table 1. On-Site Staffing Pattern for MHSA-Eligible Tenants**

Position	FTE	Hours on Site
<b>Primary Service Provider – KIWA</b>		
Service Coordinator	0.4	40 hours (16 allocated to MHSA)
Program staff: Workforce Development/Empowerment	0.1	40 hours (4 allocated to MHSA)
Program staff: Life Skills	0.1	40 hours (4 allocated to MHSA)
Program staff: Educational Support	0.1	40 hours (4 allocated to MHSA)
Program staff: Legal Services	0.1	40 hours (4 allocated to MHSA)

**\*Plan for helping tenants maintain their housing and achieve independence, including employment services, budgeting and financial training, educational opportunities, assistance in obtaining or maintaining benefits to which they are, or may be entitled, and other community services that will be made available to tenants.**

The KIWA Family Housing project will provide a continuum of services and activities made available through the resources of our project partners to build tenants' life skills, achieve successful independent living, and maintain permanent housing. These services will be provided to all tenants. With additional staffing and resources directed specifically to MHSA-eligible tenants. The project's service staff will play a critical role to assist tenants to achieve these goals. In addition, peer support from other MHSA-eligible tenants, as well as the other families and adults in the building who participate together in service activities will help to achieve independence, wellness, and permanent housing.

Case managers will undertake assessment and ongoing progress review of the MHSA-eligible tenants. Case managers will initially help them to determine personal goals and plans to achieve their goals, by developing an ISP. This will include helping the MHSA-eligible tenants resolve any issues with the property manager to help tenants retain their apartments, helping them understand their responsibilities and rights as tenants, and providing them training in daily living skills (including transportation support/travel training and training in self advocacy/community accessibility) needed to maintain their home and achieve independence, self-sufficiency, and wellness. In addition, supportive service staff will help MHSA-eligible tenants obtain and maintain public benefits, as well as access community resources off-site. The ISP will be specifically tailored to each tenant based upon their voluntary participation, engagement, and choice of services. The service program is designed to be flexible and respond to each tenant's dynamic needs and goals over time.

The following service activities in particular will assist the MHSA-eligible tenants achieve and sustain independence and remain permanently housed: worker empowerment/training, life skills and financial literacy, educational support, and legal services. While these services will be available to all tenants of the KIWA apartments,



KIWA staff will develop specific program materials and resources specifically for MHSA-eligible tenants. Case managers will work with KIWA program staff to deliver the services identified in each MHSA-eligible tenant's ISP. The service coordinator will facilitate meetings and communication amongst program staff and case managers, and will assist with arranging linkages to off-site resources, including accessing transportation and scheduling meetings or appointments.

Career Development: KIWA staff will provide employment support services such as training in completing resumes, job interviewing, conflict resolution skills, and adapting to the work environment and co-workers. In addition, DMH service agencies may also have additional staffing and resources for all of its clients that will assist link the youth to the State Department of Rehabilitation for financial assistance for vocational training and help place them in suitable employment. KIWA will run an onsite ongoing Worker Empowerment Clinic which provides case workers who can provide assistance to address workplace related issues such as overtime, rest and meal breaks, bad checks, discrimination, unlawful termination, sexual harassment, benefits, and vacation time. Case workers will be available to all tenants including MHSA-eligible tenants.

Community Living Skills: MHSA-eligible tenants will be offered life skills training. These programs will be provided through individual sessions with DMH clinical staff. In addition, KIWA's computer literacy curriculum includes topics on life skills such as money management/financial literacy, accessing public resources and public transportation online, and accessing online health resources.

Educational Support: KIWA will provide English literacy(ESL) and educational support classes on-site. Specific attention and resources for MHSA-eligible TAY will be available through these programs to help secure employment, including higher education counseling to assist tenants in enrollment at university, community college, and vocational college programs. Technology and computer literacy is a critical component of these classes.

Legal Services: KIWA staff works in conjunction with other community partners including Eviction Defense Network, Legal Aid Foundation of Los Angeles, Korean American Bar Association, South Asian Network, and Koreatown Youth & Community Center as the Koreatown Eviction Defense Network. The Network's purpose is to address a wide range of legal concerns faced by low-income tenants by hosting regular pro-bono legal clinics, which will be held on site. Staff and attorneys will allocate time to serve the needs of MHSA-eligible tenants.

### Transition Plan

A key goal of each MHSA-eligible tenant's ISP shall be long term housing stability. The KIWA Family Housing may project provide permanent affordable supportive housing for MHSA-eligible tenants even after transitioning to adulthood. A critical component of the proposed project is that as a mixed-population project, including TAY, adult, and family tenants, MHSA-eligible tenants will be able to remain in the building after age 25 if there

are available non-MHSA funded units. KIWA and DMH will work with those MHSA-eligible tenants still in need of supportive services after transition age to identify adult services provided by DMH service agencies. As TAY tenants age in place, they will already be learning to live independently among the broader population. Ongoing participation in the project's activities and programs will ensure a smooth transition out of the TAY program, without the disturbance of having to relocate to new housing. Units with MHSA-eligible tenants transitioning to other units or out of the building will be opened up for lease to other MHSA-eligible applicants. Upon gaining tenancy, new MHSA-eligible tenants will then have access to the services described in this service plan.

As the MHSA-eligible tenants age, a more concrete transition plan will be created. The plan will be based on the tenant's long-term housing goals as well as assessment and evaluation by the case manager and other service staff. At the very latest, this plan will be put in place 30 days after each tenant's 25<sup>th</sup> birthday. The transition plan will begin to be developed as early as 18-24 months prior to aging out. After being developed, the transition plan shall be reviewed in conjunction with the tenant's standard service plan at each meeting with their case manager. Should the tenant require DMH adult services, the case manager will refer the tenant to other DMH service agencies in SA 4.

The transition plan will include alternative housing options as well. It is critical that other housing options be explored early on during the transition plan implementation. This will allow for tenants to be placed onto any necessary waiting lists early enough for their units to become available within an appropriate timeframe. Following are several options that will be considered:

- Other housing within LTSC's portfolio: LTSC's portfolio includes a range of affordable housing options with varying income restrictions, including apartments within Koreatown as well as throughout Los Angeles. Case managers will work with LTSC's property management department to locate any appropriate vacancies for the transitioning tenants. LTSC and DMH will ensure that supportive services are available to MHSA-eligible tenants at their new housing location, if needed, by referring them to DMH service agencies which provide adult services.
- Referral to other MHSA funded housing: The tenant will be presented with a list of the various permanent supportive housing projects with MHSA funded units in order to select the location of his/her choice. This will allow the tenant to transition into another permanent supportive housing unit – but also to live within a more age-appropriate setting.

**\*Description of how services will support housing stability, as well as wellness, recovery, and resiliency. It is anticipated that the supportive services plan for the development will include services that are facilitated by peers and/or consumers. If this is not part of the service delivery approach, please provide an explanation.**

The program's services will be multifaceted, integrating one-on-one clinical services, case management, and peer groups. This approach is comprehensive and engages direct service staff, family members, peer advocates and interagency liaisons/collaborations. The goal of this program is to assist tenants on a path of personal growth, empowerment, and self determination. Services are voluntary, and tenants are not required to participate as a requirement of housing. It is expected that each tenant's needs will be different, and case managers will work with tenants to develop ISPs which will set the framework for services and programs that meet their specific needs.

This program will follow a holistic approach to health and wellness that recognizes the physical and emotional needs of tenants on their own terms. Wellness activities includes offering tenants a host of on site services such as classes, recreation activities, educational programs, recovery meetings, support groups and more that they can choose from, lead, and find individual opportunities for deeper involvement. Staff will help tenants make linkages to programs offered by the Bresee Community Service Center, Tae Kwon Do martial art classes, arts programs through the Music Center, as well as sports activities through the parks and recreational department. Other recreational activities include the Salvation Army summer camp that is offered every summer for low and subsidized costs. KIWA will make these linkages available to the MHSA-eligible tenants. In addition, KIWA will also provide linkages to off-site Service Area 4 Wellness Center activities for interested MHSA-eligible tenants. These include the following sites, and may include others which DMH approves in the future. Recognizing that Wellness opportunities specific to TAY may be limited, KIWA intends to work with DMH to adopt TAY appropriate wellness activities within these centers.

Special Services for Groups, 2120 W. 8<sup>th</sup> St, #210, Los Angeles, 90057  
Hollywood MH, 1224 Vine St., Los Angeles, 90038  
Northeast MHC, 5321 Via Marisol, Los Angeles, 90042

The individual service plan will be centered around support from SFPRs and a high level of engagement by the project's service coordinator to maintain ongoing access to a full range of resources. Individual clinical services may include counseling, therapy, and 24 hours a day/7 days a week crisis intervention. Supportive services will be provided on-site by KIWA staff, as well as at relevant locations such as educational facilities and the workplace. Supportive service staff will work with MHSA-eligible tenants one-on-one towards individual development goals, including life skills counseling, employment counseling, and financial management.

In addition to individual supportive services, MHSA-eligible tenants may be engaged in group activities with other MHSA-eligible tenants as well as the general population residing in the building, providing a full range of opportunities for personal growth.

KIWA and LTSC CDC will work hard to ensure housing stability for MHSA-eligible tenants, and will take measures to prevent eviction to the greatest extent possible. The service coordinator will meet weekly with property management staff. KIWA and LTSC

CDC will work together to ensure that tenants are aware of and abide by house rules and regulations, and manage expectations and potential conflicts. No information about diagnosis will be discussed during these meetings, and relevant behaviors that put tenancy at risk will be discussed. Should LTSC CDC issue a notice or warning to an MHSA-eligible tenant, the tenant's case manager will be notified as well. The case manager will then have an opportunity to work closely with the tenant to address the issue and maintain residency. The tenant's case manager/SFPR will set up a meeting with the tenant to discuss the behaviors and help the tenant create an action plan to address the concerns. As a last resort, tenants will have access to information about what to do when facing an eviction. This would include the appeals procedure, rental assistance and re-housing resources such as other supportive housing programs. KIWA will work with the tenant to ensure that they can secure housing. In the event of temporary situations in which the MHSA-eligible tenant is unable to pay rent, KIWA will work to identify resources to assist with rent payments, if available, such as flex funds if the tenant is served by a DMH Full Service Partnership (FSP) program.

**\*Strategies for engaging tenants in supportive services and in community life. Narrative should describe the anticipated frequency of contact between supportive services staff and MHSA Housing Program tenants. Include engagement strategies that provide opportunities for tenant choice:**

MHSA-eligible tenants will have ongoing access to supportive services staff and resources, as well as opportunities to engage in community life within the building as well as in the greater neighborhood. KIWA staff will encourage MHSA-eligible tenants to engage in supportive services. However, participation in all services is voluntary, and participation will not be a condition of tenancy in the MHSA-funded units. A goal of this housing program is to both integrate MHSA-eligible tenants into a population of consumers and non-consumers and maximize tenant choice for engagement in services, activities, and community resources. The fundamental factor to engage individuals is to create a service culture that is built on choice and equality. The KIWA Apartment supportive services staff will focus on supportive services that are customized to the tenant's expressed needs and goals, not the dictates of a structured system.

The supportive services staff also has a practice to encourage continued growth, as opposed to stabilization. A "high risk, high support" environment promotes hope and the recovery process. Staff will support individuals as they take risks, such as living independently for the first time, applying for a job, enrolling in a college class, learning about volunteer opportunities or asking someone out on a date.

The individual service plan will be centered around support from SFPRs, case managers, supportive service staff, and a high level of engagement by the project's service coordinator to maintain ongoing access to a full range of resources. This will begin with orientation at rent-up, and continue throughout the whole span of tenancy. The service coordinator assigned to the project will greet new MHSA-eligible tenants and offer their assistance to help them get settled. Staff will help with any needs related

to moving in, such as having utilities turned on, showing tenants around their new surroundings so they know where to find stores for some of their immediate necessities and helping them meet some of their new neighbors. They will introduce the available supportive services to MHSA-eligible tenants, emphasizing that services are based on the tenants' own choices and tailored to their own needs. KIWA has provided services and programs in Koreatown for over fifteen years, and is well positioned to deliver access to community resources. KIWA staff is well connected and very familiar with community resources including schools, cultural resources, city parks and recreation, private recreational facilities, public transportation, and health care. Case managers and the service coordinator will leverage the full range of resources available to the organization and its partners to engage the interests and needs of each tenant.

Through engagement via formal case management sessions, facilitation of group activities, involvement with the tenant council, and informal interactions as described below, the onsite service coordinator and case managers will be working in conjunction with MHSA-eligible tenants on an ongoing basis. They will assist tenants to ensure that appropriate services are available and accessed which will increase housing retention. On site staff will make every effort to have contact with each tenant as often as possible, even if they are not actively engaged in services. Staff will maintain contact with individuals who do not initially become involved in supportive services and will continue to offer assistance and look for opportunities to engage them. At the structured/intensive teaching level, case managers and the service coordinator will manage the tenants' participation in their chosen programs. At the individual support/mentoring level, case managers will work one-on-one with them to provide strong support for their recovery. As tenants progress towards self-directed and peer mediated activities, case managers will collaborate with the supportive service team to encourage and allow such opportunities in life skills, educational activities, and wellness activities.

As an informal engagement strategy, KIWA staff will be present on-site during operating hours, which will extend to 10am to 7pm to allow for employed MHSA-eligible tenants to interact with staff after employment hours. The service coordinator and program staff will be on site full-time. SFPRs and other program staff will be provided office space and will be encouraged to stay on-site as their workload allows in order to have informal interactions with tenants. Staff will also allow for MHSA-eligible tenants to drop in and have informal interaction to the greatest extent possible, and will also make themselves available throughout the building and off-site at community events or wellness activities.

To help keep the MHSA-eligible tenants engaged, on-site staff will provide services in a variety of settings, depending on tenant choices and needs to grow in their self-sufficiency. Using the "whatever it takes" approach for this proposed project, this means that the SFPR and service coordinator will visit tenants in their homes on an as-needed and as-requested basis as they adjust to apartment life; visits can range from daily (as might be needed by new tenants) to bi-monthly check-ins (a standard practice for tenants who are not in crisis or in need of urgent services). Staff will help tenants

understand their rights and responsibilities as renters, and help them with issues, such as arranging for repairs with property management and mediating any problems that may jeopardize tenants' ability to remain in housing, such as paying rent on time, being a good neighbor, etc. If needed or requested, staff will accompany them as they enroll in school or search for jobs in the community. Staff will also engage actively with the onsite property manager to act as mentor and advocate when notified of problems or potential problems with the living situation.

In addition to the on-site programs and recreational activities provided by KIWA described in the service plan, recreational and alternative therapeutic resources off-site will also be made available to the MHSA-eligible tenants. Tenants may participate in anger management classes at the Bresee Community Service Center, Tae Kwon Do martial art classes, arts programs through the Music Center, as well as sports activities through the parks and recreational department. Other recreational activities include the Salvation Army summer camp that is offered every summer for low and subsidized costs. These social interactions will assist MHSA-eligible tenants to enhance their social skills and provide them with opportunities for informal social interactions.

Upon initial lease-up of the building, the resident services/case management team will be responsible for forming a tenant council that will represent the KIWA Family Housing. This council will consist of 10-15 tenants, including an opportunity for at least one representative of the MHSA-funded units. Tenants can volunteer to be on the council and may be invited by case managers and on-site managers. If there are more volunteers than there are spaces on the council, an election will be held annually. The council will meet quarterly at a minimum and more often if deemed necessary or useful by either LTSC or KIWA staff, or the tenant council itself.

The tenant council will serve as a forum for building tenants to discuss problems related to the housing and voice concerns to management. The council will also be responsible for planning community building events (i.e. barbecues, social gatherings, or outings), and will be allocated a small budget for such events. Furthermore tenant council members will be responsible for assisting property management staff with distributing annual surveys to gather data regarding tenant satisfaction with property management services and other operational issues.

From a supportive service and property management perspective, the tenant council will be a good opportunity for service staff and property management staff to gain insight into issues that tenants are facing, the degree to which MHSA-eligible tenants are integrated into the total building's population, and the overall well being of the community. It will also help tenants increase their self-determination and independence as they participate in the ongoing development of their shared community.

The tenant's customized ISP incorporates the expressed cultural needs and desires of the individual. Often this involves the community integration aspect of the Service Plan – connecting the individual to relevant resources in the community – but may include assisting the tenant in bringing his or her cultural values and social customs into the

community living arena to share with others. KIWA is very familiar with multicultural settings, and staff will facilitate and ensure cultural competency and appropriateness. This desire to address cultural needs is particularly relevant as a service factor when assisting the tenant in selecting community-based physical and mental health providers, and is a core component of meeting the project's goals to serve underrepresented consumers.

**\*Describe the plan for communication between the service provider and property management regarding the status of tenants in the development and any building and/or community issues that need attention. Plan should include regularly scheduled meetings among the development partners, a description of service coordination for the development if there is more than one service provider, and identification of single point of contact for communicating and coordinating supportive services.**

LTSC CDC and KIWA will pay particular attention to addressing property management issues related to the status of MHSA-eligible tenants in the building. It is critical to achieving healthy outcomes to ensure that these tenants are not isolated, marginalized, or discriminated against, and that they are fully integrated into the project community. However, we recognize that property management issues may arise beyond typical issues. LTSC CDC will make sure that staff assigned to the project is trained to work with TAY homeless populations with a severe and persistent mental illness or serious emotional disturbance. Their main role at the site will be to enforce the lease rules, and they will be directed to collaborate closely with the supportive service provider to communicate any tenant issues that could be indicative of escalating negative behavior that may eventually lead to eviction. The role of supportive services staff is to work closely with the MHSA-eligible tenants to address any behavioral issues that onsite management have identified as putting their tenant in jeopardy, in addition to the ongoing service coordination requirements related to the tenants' ISPs. The goal of this collaboration between property management and social service staff is to identify negative behavioral issues in the early stages, get the social services staff involved and working with the tenant to stop the negative behavior, avert crisis and evictions and ensure that tenant's ongoing success in the housing. Tenant privacy will be respected in all instances, and permission will be sought and must be granted for any information to be shared among staff. Case managers will also work to resolve disputes between tenants. In the event that third party dispute resolution is needed, KIWA may collaborate with the Asian Pacific Dispute Resolution Center (APDRC) to resolve disputes.

The service coordinator will be considered the point person for the coordination of all services from KIWA, DMH, and any other service partners. KIWA will employ a service coordinator who will ensure that all MHSA-eligible tenants are receiving services that they have signed up to receive, and will also be responsible for convening meetings between supportive service staff and property management as needed. The service coordinator will meet regularly with case managers to review tenant's service needs, ensure access to services, programs, and activities, and resolve any challenges to

meeting the needs of each tenant. . These meetings will include DMH case managers and SFPRs from all service providers, should there be more than one service provider for the program. Each MHSA-eligible tenant's privacy and confidentiality will always be maintained and no information about diagnosis will be discussed during these meetings. The service coordinator will have access to clinical supervisors at each service provider agency to ensure ongoing communication with case managers and clinical staff. The service coordinator will also meet monthly, or other appropriate regularly set schedule, with program staff of on-site programs provided by KIWA to review tenant engagement and resolve any challenges. The service coordinator will not directly provide mental health services to the MHSA-eligible tenants.

The supportive services staff will meet with property management staff regularly or as needed to monitor the ongoing success of the MHSA-eligible tenants in their permanent housing. In the event that management issues have arisen, the service coordinator will facilitate additional meetings as necessary. The purpose of these meetings is to review any issues that relate to the tenant's ability to comply with the terms of their lease. As much as possible, staff will be vigilant in protecting the MHSA-eligible tenants' confidentiality and will adhere to all HIPPA laws. These sessions will also provide an excellent opportunity for cross-training. Service staff will work with the property management staff to educate them about industry best practices, emergency/crisis procedures, and other important tools that will help them to work better with the MHSA-eligible tenants. Conversely, property management staff will also be able to educate the service staff about important property management issues so that they may better advocate for their clients.

In the event that a crisis should arise, property management staff will have 24/7 access to supportive services staff. Identification of any adverse, incremental behavior changes is key in the early intervention of a crisis. Should such behavior be noted by the onsite manager, the property manager will contact the tenant's case manager and SFPR to alert them to the behavior in question. Once the supportive services staff has been notified of the behavioral changes, they will immediately take steps to get in touch with that tenant and begin addressing the root cause of the behavioral issues, with the goal of averting a conflict that can lead to eviction. This may include phone calls, on-site meetings, or arrangement of any additional services appropriate to resolving the crisis. Until the crisis has been resolved, onsite management and supportive services staff will continue to remain in regular contact to assess the situation.

If however, lease terms are not being followed despite the efforts of the supportive services staff, property management will notify tenants of lease infractions in the following ways.

- Courtesy notification of minor infractions of house rules
- 3 day notice to correct or quit for significant violations of house rules
- 3 day notice to quit for substantive and non-correctable violation of house rules and/or lease terms, including
  - observed criminal activity



- Substantive disturbance of neighbors
  - Damage to property
- 30 Day notice
  - After 3 courtesy notifications within 7 days
  - (5) 3 day notices or courtesy notifications over term of tenancy
- Filing of unlawful detainer

SFPRs will be notified and cc'd on any notices issued to tenants, by property management. The on-site service coordinator will work with other staff and MHSA-eligible tenants to address and prevent situations leading to eviction, address correctable offenses, and maintain long-term stability for tenants. Should an MHSA-eligible tenant be vacated from a unit, LTSC CDC will notify the SFPR as well as HP&D.

An established tenant council, involving representation and participation of at least one MHSA-eligible tenant, will meet regularly, once a month, to review and address and issues appropriate for discussion at a community level. Case managers and supportive service staff will not disclose any confidential information about any tenant, and will work with the tenant council to address and resolve potential disruptions and conflicts.

### **Appeals and Grievance Procedure**

Any appeals and/or grievances shall be filed in writing with the property management agent. Copies will be provided to the tenant's case manager or SFPR, if permission has been granted by the MHSA-eligible tenant. If necessary, a closed hearing will be held with presentation made by property management representatives as well as any relevant witnesses or tenants. Consideration shall be granted to MHSA-eligible tenants for reasonable accommodations as in initial tenant screening, and SFPR's shall be consulted to the greatest extent possible. The initial finding process will take 24 – 72 hours. The appeals will be processed within 7 calendar days. Decisions are final. Evictions will only occur if terms of lease have been broken by the tenant and all other problem solving methods have been exhausted. The tenants also have access to DMH's Patient's Rights Office.